## ICF/DD-NURSING PROGRAM PLAN CHECKLIST

Facility Name:		Telephone: ( )
Facility Address:		Fax: ( )
Contact:		E-Mail:
Proposed/Actual Capacity: M F		
Licensed Capacity of Facility: Age Range:		Ambulatory Status:

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	DS 1852 - HFPS Application Form.				
	Pages numbered, sections labeled consistent with the Table of Contents.				
PROC	GRAM PLAN REQUIREMENTS				
	Section 73859: The facility program plan shall include:				
	Section 73859(a)(1) The number of eligible clients.				
	Section 73859(a)(2) A profile of the client population using the CDER.  [PROVIDE A NARRATIVE REGARDING THE CLIENT POPULATION TO BE SERVED OR THE POPULATION BEING SERVED.]				
	Section 73859(a)(3) A summary of client's nursing and developmental priority needs.				
	Section 73859(a)(11) Provisions for accomplishing the following:				
	Section 73859(a)(11)(A) An initial assessment of each client to identify the current level of needs and function utilizing standard assessment forms.				
	Section 73859(a)(11)(B) An Individual Service Plan developed by the Interdisciplinary Professional Staff Team (IPST) under the direction of the QMRP.				
	Section 73859(a)(11)(C) Semi annual review of the individual service plan.				
CLIE	NT ASSESSMENT PROCESS				
	Section 73861(a)(1): Review and update the preadmission evaluation within 30 days following client's admission.				
	Section 73861(a)(2): Develop a comprehensive written assessment which shall provide the basis for formulating an individual service plan which shall include, but not be limited to:				

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	Section 73861(a)(2(A) Nursing assessment.				
	Section 73861(a)(2)(B) Assessment of developmental status including strengths, weaknesses and needs.				
	Section 73861(a)(2)C) Prioritized objectives.				
	Section 73861(a)(2)(D) Discharge plan.				
	Section 73861(a)(3) Assess the client's recreational interests.				
	Section 73861(a)(4) Consider the client's need for guardianship or conservatorship if the client will attain majority or become emancipated prior to the next scheduled review.				
	Section 73861(b) The QMRP shall make available and interpret the assessment to the direct care staff, the client and when lawful, the client's parents or authorized representative.				
	W259; §483.440(f)(2) FACILITY PRACTICES: The Comprehensive Functional Assessment of each client must be reviewed by the IDT for relevancy and updated as needed.  [IDENTIFY METHODS TO REVIEW AND UPDATE ASSESSMENT INFORMATION AND WHO				
	WILL BE RESPONSIBLE.]  Section 73862(a)(2)(3) W226-228; §483.440(c)(4) Within 30 days after admission, the IDT must prepare for each client an IPP (ISP) that states the specific objectives necessary to meet the client's needs, as identified by the comprehensive assessment and planned sequence for dealing with those objectives. These objectives must:				
	W229; §483.440(c)(4)(i) Be stated separately in terms of single behavioral outcome.				
	W230; §483.440(c)(4)(ii) Be assigned projected completion dates.				
	W231; §483.440(c)(4)(iii) Be expressed in behavioral terms that provide measurable indices of performance.				
	W232; §483.440(c)(4)(iv) Be organized to reflect a development of progression appropriate to the individual.				
	W233; §483.440(c)(4)(v) Be assigned priorities.				
PRO	GRAM ELEMENTS	•	1		
	Section 73864(a) The facility shall have the capability to provide program services to those developmentally disabled clients it serves. These program services shall be based on the client's specific needs as identified through the individual client assessment and include as appropriate:				
	Section 73864(a)(1) Nursing care activities.				

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	Section 73864(a)(2) Habilitation programs including but not limited to:				
	Section 73864(a)(2)(A) Sensory motor development.				
	Section 73864(a)(2)(B) Self-help skills training.				
	Section 73870(a)(3) Behavior management program. [DISCUSS BEHAVIOR MANAGEMENT IN THE NEXT SECTION.]				
	Section 73864(b) The facility shall provide no less than 56 hours of active treatment per week, including weekends. For those clients who require a combination of developmental program services and nursing care activities, no less than 28 hours per week shall be devoted to the developmental programs unless otherwise approved in the facility program plan. The active treatment program shall include:				
	Section 73864(b)(1) Any active treatment provided by agencies either outside or inside the facility shall be specified in the ISP.				
	Section 73864(b)(3) No more than two consecutive hours not devoted to active treatment as specified in the ISP. If additional unstructured time is required such need shall be determined by the IPST and documented in the client's individual service plan and the facility's program plan.				
	Section 73864(b)(4) Weekend program schedule which emphasizes recreational and social experiences as specified in the ISP.				
	W126; §483.420(a)(4) FACILITY PRACTICES: Allow individual clients to manage their financial affairs and teach them to do so to the extent of their capabilities.				
	483.420(a)(4) GUIDELINES: Since money is a right, determine if the facility demonstrated, based on objective data, that the individual was unable to be taught how to use money before the decision was made to restrict the right.				
	W196; §483.440(a)(1) FACILITY PRACTICES: Each client must receive continuous active treatment program, which includes aggressive, consistent implementation of a program of specialized and generic training, treatment, health services and related services that is directed toward:				
	W196; §483.440(a)(1)(i) The acquisition of the behaviors necessary for the client to function with as much self determination and independence as possible and				
	W196; §483.440(a)(1)(ii) the prevention or deceleration of regression or loss of current optimal functional status.				
	AVIOR MANAGEMENT PLAN - PROGRAM COMPONENTS on 73870 and W197, W274-W309	<u> </u>	<u> </u>	<u> </u>	
	Section 73870(c)(2) A written assessment conducted by the IPST to identify behavioral excesses and/or deficits which require management. This assessment shall address the following areas:				
	Section 73870(c)(2)(A) Social and emotional status.				

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	Section 73870(c)(2)(B) Communication skills.				
	Section 73870(c)(2)(C) Physical and mental status.				
	Section 73870(c)(2)(D) Cognitive and adaptive skills.				
	Section 73870(c)(2)(E) Description of behavioral excesses and/or deficits, along with their frequencies, durations and intensities.				
	Section 73870(c)(2)(F) A baseline data collection system which addresses the maladaptive behavior(s).				
	Section 73870(c)(2)(G) An analysis of behavioral excesses and/or deficits identified in terms of their antecedents and consequences.				
	Section 73870(c)(3) A written behavior management plan available to all facility staff, regional center representative, the client if appropriate, or the client's authorized representative, when lawful. The behavior management plan shall include:				
	Section 73870(c)(3)(A) Long-range goals.				
	Section 73870(c)(3)(B) Behavioral objectives that are time-limited, measurable, observable and which complement the long-range goals.				
	Section 73870(c)(3)(C) Behavioral objectives which specify:				
	Section 73870(c)(3)(C)(1) The name of the primary person providing the intervention				
	Section 73870(c)(3)(C)(2) The place of intervention				
	Section 73870(c)(3)(C)(3) The reinforcements to be used to elicit adaptive behaviors				
	Section 73870(c)(3)(C)(4) The type(s) of interventions to be used.				
	Section 73870(c)(3)(C)(5) The anticipated outcome of the behavior management plan.				
	Section 73870(c)(3)(C)(6) The date by which the anticipated outcome is to be achieved.				
	Section 73870(c)(4) The written document that clearly states, PRIOR to the use of behavioral interventions that:				
	Section 73870(c)(4)(A) The procedure to be used is the least restrictive and most effective for the maladaptive behavior.				
	Section 73870(c)(4)(B) The environment where the behavior change is to occur is designed to avoid stigma, and to support and reinforce compatible and adaptive behaviors.				

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	Section 73870(c)(4)(C) A specific choice from different behavior interventions has been made based on relative effectiveness.			
	Section 73870(c)(4)(D) The undesirable long-term and short-term effects which may be associated with the procedures have been identified.			
	Section 73870(c)(4)(E) The conditions under which procedure is contraindicated have been identified.			
	Section 73870(c)(4)(F) Social, behavioral and status benefits that can be expected have been specified.			
	Section 73870(c)(4)(G) The rights of the developmentally disabled person were and are protected in accordance with Section 4503 and 4505 of the W & I Code.			
	Section 73870(c)(4)(H) All legal and regulatory requirements have been met.			
	Section 73870(c)(4)(I) There is a plan to decrease the restrictiveness of the program over time.			
	Section 73870(c)(4)(J) A recommended treatment hierarchy which identifies the maladaptive behavior warranting the most immediate attention has been developed.			
	Section 73870(c)(5) A written monthly report of progress which includes:			
	Section 73870(c)(5)(A) The progress attained in achieving each behavioral objective.			
	Section 73870(c)(5)(B) Determination as to whether the program should continue as designed or be amended.			
	Section 73870(d) For those instances when it can be documented that behavioral programs utilizing only positive reinforcement do not result in the desired adaptive behavior, mild restrictive interventions may be employed. Such interventions shall be limited to:  [IF ANY OF THE FOLLOWING BEHAVIORAL PROGRAMS WILL NOT BE USED, STATE THIS IN YOUR PROGRAM PLAN]			
	Section 73870(d)(1) Contingent observation			
	Section 73870(d)(2) Extinction			
	Section 73870(d)(3) Withdrawal of social contact			
	Section 73870(d)(4) Fines of tokens or other reinforcers			
	Section 73870(d)(5) Exclusion time-out, with client in constant view			
	W128; §483.420(a)(6) FACILITY PRACTICES: Explain the type of restrictive/aversive techniques to be utilized after approval from ID team/Human Rights Committee (HRC) and written informed consent has been obtained.			

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	Section 73869 Containment				
	Section 73869(a)(7) Physical restraint				
	Section 73869(b)(1) Chemical restraint				
	Section 73869(b)(2) Psychotherapeutic or behavior altering drugs shall be used only as an integral part on an individual service plan that is designed by an interdisciplinary professional staff/team to leased to a less restrictive way of managing maladaptive behavior and ultimately to the elimination of those behaviors for which the drugs are employed.				
ним	AN RIGHTS COMMITTEE				
	Section 73918(a) The facility shall have a Human Rights Committee (HRC) which shall be responsible for assuring that client rights as specified in the Welfare and Institutions Code Section 4502-4505 and Sections 50500-50550, Title 17 California Administrative Code are safeguarded.				
	Section 73918(b) Minutes of every committee meeting shall be maintained in the facility and shall indicate the names of the members present, date, subject matter discussed and action taken.				
	Section 73918(c) Composition of the committee shall consist of at least the administrator, QMRP, RN, Regional Center Client's Rights Advocate and with the consent of the client or when otherwise permitted by law, a client representative or developmentally disabled person, parent or community representative and may include a member from the local Area Board on Development Disabilities.				
	Section 73918(d) The committee shall meet at least quarterly.				
	Section 73918(e) The function of the HRC shall include:				
	Section 73918(e)(1) Development of policies and procedures to assure and safeguard the client's rights listed in the W &I Code and Title 17.				
	Section 73918(e)(2) Document and participate in developing and implementing relevant in-service training programs.				
	Section 73918(e)(3) Review treatment modalities used by the facility where client human rights and dignity is affected.				
	Section 73918(e)(4) Review and approve at least annually, all behavior management programs. For those client programs utilizing restrictive procedures, the minutes of the HRC shall reflect all previous treatment modalities used by the facility and shall document that the current program represents the least restrictive alternative.				
	W124; §483.20(a)(2) FACILITY PRACTICES: Inform each client, parent (if the client is a minor), or legal guardian, of the client's medical condition, developmental and behavioral status, attendant risks of treatment and of the right to refuse treatment.				

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INITIA	AL ORIENTATION TRAINING				
	Section 73874.1(b) All new staff shall be provided sixteen (16) hours of orientation by a QMRP, Registered Nurse, Licensed Vocational Nurse or Licensed Psychiatric Technician. These hours shall be completed and be documented during the first forty (40) hours of employment.				
	Section 73874.1(b)(1) Prior to providing direct client care and during the first eight hours of employment, each direct-care staff member shall be provided with the following:				
	Section 73874.1(b)(1)(A) Tour of the facility.				
	Section 73874.1(b)(1)(B) Description of client population.				
	Section 73874.1(b)(1)(C) The client's daily schedule.				
	Section 73874.1(b)(1)(D) Instruction in the use and application of equipment and assistive devices.				
	Section 73874.1(b)(1)(E) Instruction in unusual occurrences and lifesaving procedures including but not limited to, emergency procedures for relief of choking.				
	Section 73874.1(b)(1)(F) Orientation to fire and disaster plans.				
	Section 73874.1(b)(1)(G) An introduction to client care and special needs of developmentally disabled persons.				
	Section 73874.1(b)(2) The remaining eight (8) hours of orientation shall include:				
	Section 73874.1(b)(2)(A) Administrative structure of the facility.				
	Section 73874.1(b)(2)(A)(1) Organization of staff.				
	Section 73874.1(b)(2)(A)(2) Services offered.				
	Section 73874.1(b)(2)(A)(3) The role of direct-care staff, including job descriptions, the team concept and approaches to clients.				
	Section 73874.1(b)(2)(A)(4) Personnel Policies.				
	Section 73874.1(b)(2)(B) The facilities philosophy of client care.				
	Section 73874.1(b)(2)(C) Overall concepts of the facility's program to meet the needs of the clients, including normalization and interdisciplinary professional staff team concept.				
	Section 73874.1(b)(2)(D) Developmental growth and assessment.				

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	Section 73874.1(b)(2)(E) Client's activities of daily living.				
	Section 73874.1(b)(2)(F) Implementation of the individual service plan.				
	Section 73874.1(b)(2)(G) Clients' rights.				
	Section 73874.1(b)(2)(H) Nursing policies and procedures.				
	Section 73874.1(b)(2)(I) Legal ethical considerations of health care.				
	Section 73874.1(b)(2)(J) The role of federal and state regulations in the provisions of care by employees.				
IN SE	RVICE TRAINING PLAN				
	Section 73874.1(c) The facility shall require that all direct care staff receive at least 3 hours per month, 36 hours annually, of planned in-service education which shall be documented and shall include:				
	Section 73874.1(c)(1) Program techniques specific to the facility's clients.				
	Section 73874.1(c)(2) Developing program objectives for clients.				
	Section 73874.1(c)(3) Evaluation, assessment techniques.				
	Section 73874.1(c)(4) Documentation of a client's response to his/her program including observation, reporting and recording.				
	Section 73874.1(c)(5) Special developmental needs of the facility's clients.				
	Section 73874.1(c)(6) Sensory deprivation and stimulation.				
	Section 73874.1(c)(7) Interpersonal relationships and communication skills between staff and clients.				
	Section 73874.1(c)(8) Psychosocial aspects of developmental disabilities as related to individual, family and community.				
	Section 73874.1(c)(9) Confidentiality of client information.				
	Section 73874.1(c)(10) Detection of signs of illness or dysfunction that warrant medical or nursing intervention.				
	Section 73874.1(c)(11) Maintenance of healthy skin: prevention of skin breakdown, body positioning and range of motion.				
	Section 73874.1(c)(12) Basic nursing & health related skills.				

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	Section 73874.1(c)(13) Bladder and bowel training and management.				
	Section 73874.1(c)(14) Oral hygiene.				
	Section 73874.1(c)(15) Nutritional needs of clients including special feeding techniques.				
	Section 73874.1(c)(16) Behavior management.				
	Section 73874.1(c)(17) Emergency intervention procedures for behavior control.				
	Section 73874.1(c)(18) Prevention & control of infection.				
	Section 73874.1(c)(19) Fire & accident prevention & safety.				
	Section 73874.1(c)(20) Disaster preparedness.				
	Section 73874.1(c)(21) Clients rights as specified in Sections 4502 through 4507 of the W&I code and Sections 50500 through 50550 of Title 17, California Code of Regulations.				
	Section 73874.1(c)(22) The role and involvement of parent, guardian, conservator or authorized representative in the client's overall service plan.				
	Section 73874.1(c)(23) Instructions in first aid and CPR to be taught by an instructor certified by the American Red Cross or the American Heart Association.				
	Section 73874.1(c)(24) If any client has epilepsy, instruction in the causes and treatment of epilepsy, care of the client during and following an epileptic seizure, safety precautions and protective equipment.				
	Section 73874.1(c)(25) Locating and using program reference materials.				
	Section 73874.1(c)(26) The use and proper application of postural supports.				
	Section 73874.1(c)(27) Caring for the dying client and understanding the grieving process.				
PRO	GRAM PLAN ATTACHMENTS				
#1	Section 73859(a)(5) A one-week program schedule for clients in the facility.				
#2	Section 73864(b)(4) Weekend programming which emphasizes recreational and social experiences.				
#3	Section 73859(a)(6)(A) The facility's organizational chart.				
#4	Section 73859(a)(6)(B) The IPST utilized indicating their disciplines worked each week [SEE CONSULTANTS AND PROFESSIONAL STAFF, SECTION III, PAGES 3-5] [OPTION: PROVIDE MONTHLY HOURS]				
#5	Section 73859(a)(6) Facility staffing pattern (for one week).  [See Staff Schedules, Section III, Pages 3-6 & 3-7]				

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#6	Section 73859(a)(7) A description of space provided for program activities. [A FACILITY FLOOR PLAN.]			
#7	Section 73859(a)(8) Description of the equipment available for program use.			
#8	Section 73859(a)(10) A plan for utilization of community resources.			
#9	W127; §483.420(a)(5), W153 through W157 §483.420(d)(2) through §483.420.(d)(4)Task Two Protocol: Develop system to prevent, report, and investigate reported/suspected abuse. [SEE ADDITIONAL INFORMATION IN PROGRAM PLAN DEVELOPMENT PACKET, SECTION IV]			
#10	Develop a facility wide Quality Assurance Plan.			
#11	Section 73859(a)(6)(B) Attach the following complete updated information for each professional staff:  1. Copy of contract.  2. Professional license, registration, certification or diploma.  3. Resume.  [INCLUDE TRANSLATIONS OF DIPLOMAS IF NECESSARY]			
#12	Section 73910(a) The facility will maintain written transfer agreements with one or more general acute hospitals to make services of those facilities accessible to clients as needed and to facilitate the expeditious transfer of clients and essential client information.			
#13	Medication Training Program Plan Section 73859(a)(13) A training program for drug administration for non- licensed personnel who administer drugs in the facility in accordance with Section 73874(d).  [TO DEVELOP THE MEDICATION TRAINING PLAN, SEE THE MEDICATION TRAINING CHECKLIST ATTACHMENT, SECTION 3-8, PAGES 1-6. THE MEDICATION TRAINING PLAN MUST BE SUBMITTED AS PART OF YOUR PROGRAM PLAN.]			
#14	Attendant Training Program Plan Develop a lesson plan for EACH TOPIC under Module 1-4. Select ONE lesson plan from each Module and submit to DDS for approval. Include in your submission a completed DS 1853 -Training Program for ICF/DD-N Attendant form.			
14.1	Specialized Procedures Specialized Procedure Approval Cover Sheet Specialized Procedure Format Sheet [See Section IV For Development of Specialized Procedures]			
#15	Health and Safety Code Section, Section 1268.8 New Provider Orientation [Include a copy of the certificate demonstrating proof of attendance for the 8-hour New Provider Orientation Training]			